

State of South Dakota  
Statement of Financial Interest  
Candidate for Public Office

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S.D. SEC. OF STATE

File statement in the office where your nominating petition or convention nomination certification was filed.

Please read information on reverse side before completing this form.

1. Name John Graham  
2. Address P.O. Box 23 Mansfield SD 57460  
3. Office Sought District 2 House  
4. What is your occupation/profession? Maintainer / Maintainer

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

Social Security Disability  
Hartford (Long Term Disability)

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

claimant  
claimant

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

N/A

What is the nature of your immediate family's association with each?

N/A

State of South Dakota )  
County of Spink ) SS.

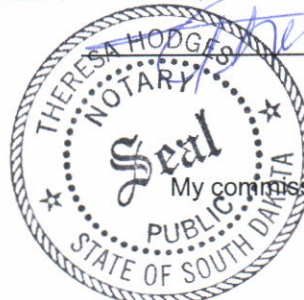
Verification

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed) \_\_\_\_\_

Sworn to before me this 14 day of April, 20 14

(Seal)



\_\_\_\_\_  
Officer Administering Oath

My commission expires: 4-21-15